

10606894

PATENT APPLICATION FEE DETERMINATION RECORD
Effective January 1, 2003

Application or Docket Number

10606894

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

| | | |
|----------------------------------|--------------------------|--------------|
| TOTAL CLAIMS | 5 | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 5 minus 20 = | * |
| INDEPENDENT CLAIMS | 2 minus 3 = | * |
| MULTIPLE DEPENDENT CLAIM PRESENT | <input type="checkbox"/> | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

| RATE | FEES |
|-----------|--------|
| BASIC FEE | 375.00 |
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL | |

OTHER THAN
SMALL ENTITY
OR

| RATE | FEES |
|-----------|--------|
| BASIC FEE | 750.00 |
| X\$18= | |
| X84= | |
| +280= | |
| TOTAL | 750 |

CLAIMS AS AMENDED - PART II

8623105

(Column 1)

(Column 2) (Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * 15 | Minus | ** 20 | = 1 |
| Independent | * 3 | Minus | ** 3 | = 1 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/> | | | |

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

| RATE | ADDI- TIONAL FEE |
|------------------|------------------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

111
8/15/06

(Column 1)

(Column 2) (Column 3)

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * 15 | Minus | ** 20 | = |
| Independent | * 3 | Minus | ** 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE |
|------------------|------------------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

111
8/15/06

(Column 1)

(Column 2) (Column 3)

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * | Minus | ** | = |
| Independent | * | Minus | *** | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | <input type="checkbox"/> | | | |

| RATE | ADDI- TIONAL FEE |
|------------------|------------------------|
| X\$ 9= | |
| X42= | |
| +140= | |
| TOTAL ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.